

Supplemental Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ACETABULAR IMPLANT AND METHOD FOR THE PRODUCTION OF SAID IMPLANT
Attorney Docket Number::	0512-1319
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BRUNO
Middle Name::
Family Name:: BALAY
Name Suffix::
City of Residence:: TREVoux
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 70, CHEMIN DES ERABLES, SAINT BERNARD
Address::
City of Mailing Address:: TREVoux
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-01600

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-CLAUDE
Middle Name::
Family Name:: CARTILLIER
Name Suffix::
City of Residence:: LYON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 56, RUE PAUL SISLEY
Address::
City of Mailing Address:: LYON

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-69008

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: CLAUDE
Middle Name::
Family Name:: CHARLET
Name Suffix::
City of Residence:: SAINT DIDIER AU MONT D'OR
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 77, CHEMIN DES ESSES
City of Mailing Address:: SAINT DIDIER AU MONT D'OR
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-69370

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-CHRISTOPHE
Middle Name::
Family Name:: CHATELET
Name Suffix::
City of Residence:: ~~CHAZEY SUR AIN~~ Jassans
State or Province of
Residence::
Country of Residence:: FRANCE

Street of Mailing ~~ROUTE DE RIGNIEUX~~ Quai Maurice
Address:: Utrillo

City of Mailing Address:: ~~CHAZEY SUR AIN~~ Jassans
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: ~~F-01150~~ 01480

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MICHEL-HENRI
Middle Name::
Family Name:: FESSY
Name Suffix::
City of Residence:: ~~CHARLY~~ Saint Genis Laval
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing ~~55, RUE DE LA MÔRE~~ 13, rue Luizet
Address::
City of Mailing Address:: ~~CHARLY~~ Saint Genis Laval
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: ~~F-69390~~ 69230

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: LOUIS
Middle Name::
Family Name:: HOVY
Name Suffix::

City of Residence:: MÜHLTAL-TRAISA
State or Province of
Residence::
Country of Residence:: GERMANY
Street of Mailing LUDWIGSTRASSE 21A
Address::
City of Mailing Address:: MÜHLTAL-TRAISA
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: 64367

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ALAIN
Middle Name::
Family Name:: MACHENAUD
Name Suffix::
City of Residence:: LA BALME DE SILLINGY
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 47, ROUTE DE LA BÂTHIE
Address::
City of Mailing Address:: LA BALME DE SILLINGY
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-74330

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-MARC

Middle Name::
 Family Name:: SEMAY
 Name Suffix::
 City of Residence:: SAINT PRIEST EN JAREZ
 State or Province of
 Residence::
 Country of Residence:: FRANCE
 Street of Mailing 13, RUE DE BEAUMONT
 Address::
 City of Mailing Address:: SAINT PRIEST EN JAREZ
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: F-42270

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: FRANCE
 Status:: Full Capacity
 Given Name:: LOUIS
 Middle Name::
 Family Name:: SETIEY
 Name Suffix::
 City of Residence:: GLEIZE
 State or Province of
 Residence::
 Country of Residence:: FRANCE
 Street of Mailing 1003, RUE JOSEPH REMUET
 Address:: LA RIPPE
 City of Mailing Address:: GLEIZE
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: F-69400

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-PIERRE
Middle Name::
Family Name:: VIDALAIN
Name Suffix::
City of Residence:: ANNECY LE VIEUX
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing "LA BOISERIE", 8, RUE DU PONT DE THÉ
Address::
City of Mailing Address:: ANNECY LE VIEUX
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-74940

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: ULRICH
Middle Name::
Family Name:: WITZEL
Name Suffix::
City of Residence:: WUPPERTAL
State or Province of
Residence::
Country of Residence:: GERMANY
Street of Mailing IM KÄMPCHEN 7
Address::
City of Mailing Address:: GLEIZE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 42279

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: SYLVAIN
Middle Name::
Family Name:: ZANELLO
Name Suffix::
City of Residence:: MIONS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 2, ALLÉE MAURICE DRUON
City of Mailing Address:: ANNECY LE VIEUX
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-69780

Correspondence Information

Correspondence Customer Number:: 00466

Representative Information

Representative Customer Number::	00466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002045	7/29/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0309405	7/30/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province 'of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::